

This is an invitation to receive supplemental funding for window lead abatement.

Please fill out the form below and return it to:

City of Milwaukee Health Department Childhood Lead Poisoning Prevention Program
Attn: Richard Gaeta
841 N Broadway, Room 118
Milwaukee, WI 53202

Phone: 414-286-0387 Fax: 414-286-0715 Richard Gaeta: 414-286-5788

Property Address _____

Owner's Name _____ Telephone number _____

Owner's Address _____ City/State _____ ZIP _____

Owner's email address _____

Please list all rental properties you own in the City of Milwaukee below (or attach list):

ADDRESS	No. of UNITS	Vacant?	TAX Status:
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Current <input type="checkbox"/> Delinquent
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Current <input type="checkbox"/> Delinquent
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Current <input type="checkbox"/> Delinquent
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Current <input type="checkbox"/> Delinquent
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Current <input type="checkbox"/> Delinquent

As a grant funded organization, the City of Milwaukee Health Department must comply with federal regulations in obtaining verification of the applicant's race and ethnicity. Please provide the following information:

RACE You may mark (X) more than one.

- ☐ American Indian or Alaska Native ☐ Asian ☐ Black/African American
☐ Native Hawaiian or other Pacific Islander ☐ White ☐ Combination _____

ETHNICITY Mark (X) only one. ☐ Hispanic or Latino ☐ Not Hispanic or Latino

Do you or your tenants need either of the following services? ☐ Interpreter ☐ Special Accommodations

How did you hear about our program?

- ☐ Word of Mouth ☐ Mailing Referral Agency (agency name) _____
☐ Other (please explain) _____

Please read carefully and sign the reverse side of this application.

Acknowledgement:

I agree to complete my Owner's Scope of Work on the grant-funded unit within 60 days of signing a contract with a certified lead abatement contractor or attending an 8-hour training class. If this property has orders for lead abatement, I agree to have a certified lead abatement contractor complete the ordered work within 30 days so that I may remain eligible for the grant funding. I agree to pay a \$57 permit fee for the project address, directly to the selected contractor. I acknowledge that all lead-based paint testing results, summaries of lead-based paintwork, and clearances must be disclosed to purchasers and tenants under the federal Residential Lead-Based Paint Hazard Reduction Act.

Property Owner Requirements

As the owner of said property, I will not permit any illegal or abusive activities to occur on the premises – including but not limited to the following: The presence of illegal drugs, brandishing weapons, or threats against City of Milwaukee Health Department (MHD) staff or contractors. I also understand that failure to comply will result in immediate disqualification from receiving supplemental funding.

Owners Living in Enrolled Properties (Owner Occupants)

Owners living in the property that is eligible to receive funding for lead abatement must provide MHD staff with a copy of their most recent Federal income tax return to prove income eligibility. This documentation is required before an inspection can be scheduled.

Owner's Scope

I understand that all painted surfaces that are peeling (except windows) will need to be corrected by me or my agent. I or my agent will attend a free 8-hour class to learn how to make safe paint repairs. I will provide proof of class attendance or I will hire a certified lead abatement contractor to make the necessary repairs. I do not have to attend the training class if I choose to hire a lead abatement contractor to complete the Owner's Scope of Work. I will have 60 days from the date of class attendance or the hiring of a contractor to complete the Owner's Scope of Work to be eligible for window abatement funds.

Vacant Units

If the property is vacant: heat, electricity and water must be turned on 24 hours before the contractor's starting date. All floors must be cleared of debris and wet mopped before the contractor's starting date.

Vinyl Replacement Windows

Owners choosing vinyl replacement window installation must allow contractors to remove and dispose of existing storm windows to satisfy window manufacturer warranty. Warranty documentation is available from owner's contractor.

Contractor Selection

Owners receiving lead abatement funding from the MHD must choose a contractor from the MHD Certified Lead Abatement Contractor List to perform the work.

Storm Windows and Sash Replacements

Owners choosing the Milwaukee jamb liner treatment are required to have tight-fitting storms on all windows prior to abatement. The MHD will pay for the replacement of the first three unsalvageable sashes per unit. The owner shall pay for any additional sashes needing replacement.

YOU MUST PROVIDE YOUR TENANT WITH 24 HOURS' NOTICE PRIOR TO ENTRY.

It is the owner's responsibility to assure rental units are accessible to the contractor by providing entry each day with his/her presence or a key for the duration of the job. If entrance is not granted to the unit, the contractor will require a trip charge.

Owners must prepare windows prior to contractors performing lead abatement work. This includes removing any window coverings and moving furniture that may be blocking window access. Owners must arrange the reinstallation of these items at the end of the abatement process. Stairwells must be free of storage items and wet-mopped before the contractor's start date. **If tenants are unable to perform these functions, owners will be required to conduct these activities.**

For their health and safety, occupants must vacate the lead abatement unit while certified contractors are performing work. Lead abatement work will be stopped if occupants are present within the unit.

- The owner is responsible for the cost of any change orders not written on the scope of work.
- The MHD will provide you with inspection and clearance reports upon completion of the project.
- Rental units must be available to low-income tenants 3 years after project completion.
- I agree to affirmatively rent to families with children less than 6 years of age.
- Failure to comply with any terms of this agreement will result in failure to access future supplemental funding opportunities.

**I have read and understand my responsibilities as a property owner applying for lead abatement grant funds.
I understand my responsibility to keep my property in a lead-safe state after lead abatement is completed.**

Owner's signature: _____ Date: _____